

Docket No.: 181-035.2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
PATENT OPERATIONS

In re Application of:

Peter Dronzek

Group Art Unit: 1772

Serial No.: 10/727,223

Examiner: Ahmad, Nasser

Filed: December 3, 2003

For: DURABLE SUPPORTS FOR LABELING AND RELABELING OBJECTS

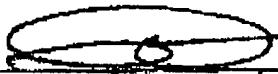
New York, NY 10036  
July 28, 2005

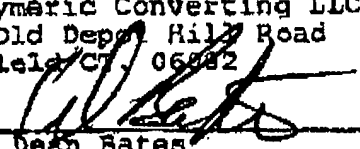
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

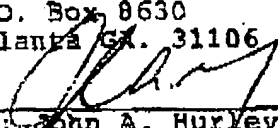
**POWER OF ATTORNEY**

The undersigned assignees of the above-identified application hereby revoke all prior powers of attorney and appoint Robert S.M. Gorman, Esq. Reg. No. 41,790, as attorney to represent them in all proceedings in the Patent and Trademark Office. Please address all future correspondence to:

Robert S.M. Gorman, Esq.  
305 Madison Ave.  
Suite 449  
New York, NY 10165  
Tel. 212-807-4170  
Fax. 212-212-957-1912

  
By: Frank Magnani  
Polymeric Converting LLC  
54 Old Depot Hill Road  
Enfield, CT 06032

  
By: Dean Bates  
Sunbelt Consulting Group, Inc.  
P.O. Box 8630  
Atlanta GA. 31106

  
By: John A. Hurley  
Marathon Labels, Inc.  
3820 Merchant Road  
Ft. Wayne, IN. 46818



PTO/SB/92 (04-05)  
Approved for use through 11/30/2005. CMB 0651-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/727,223
Filing Date	December 3, 2003
First Named Inventor	Dronzak, Peter
Art Unit	1772
Examiner Name	Ahamed, N.
Attorney Docket Number	IP 2005-10-01 (CON)

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☐ The address associated with  
Customer Number:

OR

<input type="checkbox"/> Firm or Individual Name	Robert S.M. Gorman, Esq.		
Address	Gorman Associates, Law Offices Suite 440 Madison Avenue		
City	New York	State	NY
Country	USA	Zip	10165
Telephone	212-607-4170	Email	gorman@gormanlawassociates.com

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

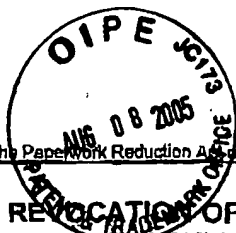
Signature			
Name	John Hurley		
Date	8/3/05	Telephone	(260) 489-1101 x202

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.30. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1460, Alexandria, VA 22313-1460. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Approved for use through 11/30/2005. OMB 0551-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/727,223
Filing Date	December 3, 2003
First Named Inventor	Dronzek, Peter
Art Unit	1772
Examiner Name	Ahamad, N.
Attorney Docket Number	IP 2005-10-01 (CON)

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☐ The address associated with  
Customer Number:

OR


<input type="checkbox"/> Firm or Individual Name	Robert S.M. Gorman, Esq.				
Address	Gorman Associates, Law Offices Suite 449 Madison Avenue				
City	New York	State	NY	Zip	10185
Country	USA				
Telephone	212-807-4170		Email	gorman@gormanlawassociates.com	

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature					
Name	Frank M. Naki				
Date	8-3-05		Telephone	860-654-0006	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 3 forms are submitted.

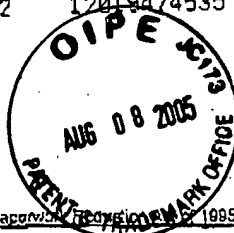
This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

08/02/2005 18:02

12019474535

GORMAN



BEST AVAILABLE COPY

Approved for use through 11/30/2005. OMB 0851-0033  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Project 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/727,223
Filing Date	December 3, 2003
First Named Inventor	Dronzek, Peter
Art Unit	1772
Examiner Name	Ahamad, N.
Attorney Docket Number	IP 2005-10-01 (CON)

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☐ The address associated with  
Customer Number:

OR

<input type="checkbox"/> Firm or Individual Name	Robert S.M. Gorman, Esq.				
Address	Gorman Associates, Law Offices Suite 449 Madison Avenue				
City	New York	State	NY	Zip	10165
Country	USA				
Telephone	212-807-4170		Email	gorman@gormanlawassociates.com	

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature	<i>[Handwritten Signature]</i>		
Name	DEAN H. BATES, SUNBELT Consulting Group		
Date	8/2/2005	Telephone	404-892-8778

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9198 and select option 2.